### FORM D

**UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

0076 ,2005

hours per responses......16.00 SEC USE ONLY Prefix Serial

DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Markstone Capital Partners, L.P.	
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: ☐ Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change)  Markstone Capital Partners, L.P.	
Address of Executive Officers (Number and Street, City, State, Zip Code) 1801 Century Park East, Suite 2150, Los Angeles, CA 90067	Telephone Number (Including Area Code) 310-553-5050
Address of Principal Business Operations (Number and Street, City, State Zip Code) (if different from Executive Officers) Same as above	Telephone Number (Including Area Code)
Brief Description of Business	
Investment Fund	
Type of Business Organization	_
corporation imited partnership, already formed	other (please specific CCC
☐ business trust ☐ limited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization  Month Year  Actual or Estimated Date of Incorporation or Organization  Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada, FN for other foreign jur	

OTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

## GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

LA1:1048704.1

		A. BASIC IDENT	TIFICATION DATA		
2. Enter the information reque					
<ul><li>Each beneficial owner</li><li>Each executive officer</li></ul>	having the power to vo	ate issuers and of corporate		or more of a class of ers of partnership iss	equity securities of the issuer.
	aging partner of partner				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ir	ndividual)	······			
Markstone Capital Group, L.P.					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
1801 Century Park East, Suite 2	150, Los Angeles, CA	90067			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ir	ndividual)				
Markstone Capital Group, LLC					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
1801 Century Park East, Suite 2					
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Broidy, Elliott	31 1 3	G: G: G: L)	·		
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
1801 Century Park East, Suite 2					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)			<del></del>	
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
	(Use blank	sheet, or copy and use addi	tional copies of this sheet, a	s necessary.)	
			•		
		2 0	of 10		

	B. INFORMATION ABOUT OFFERING		
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	YES	NO
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?	\$100,0	_
3.	Does the offering permit joint ownership of a single unit?	YES	NO
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar		_
	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		·
Full 1	Name (Last name first, if individual)		
Busir	ness or Residence Address (Number and Street, City, State, Zip Code)		
Buon	tess of realise realises (number and onces, eng, state, 219 code)		
Name	e of Associated Broker or Dealer		
States	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Chec	ck "All States" or check individual States)		All States
AL	AK AZ AR CA CO CT DE DC FL GA	HI	ID
IL MT	IN         IA         KS         KY         LA         ME         MD         MA         MI         MN           NE         NV         NH         NJ         NM         NY         NC         ND         OH         OK	MS OR	MO PA
RI	SC SD TN TX UT VT VA WA WV WI	WY	PR
Full N	Name (Last name first, if individual)		
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)		
Name	of Associated Broker or Dealer		<del></del>
Ctotae	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
		_	
(Chec	ck "All States" or check individual States)	📙 .	All States
AL IL	AK AZ AR CA CO CT DE DC FL GA IN IA KS KY LA ME MD MA MI MN	HI MS	ID MO
MT	NE NV NH NJ NM NY NC ND OH OK	OR	PA
RI	SC SD TN TX UT VT VA WA WV WI	WY	PR
Full N	Name (Last name first, if individual)		
Busin	ess or Residence Address (Number and Street, City, State, Zip Code)		
Name	of Associated Broker or Dealer		
States	in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Chec	k "All States" or check individual States)	<u>C</u>	States
AL IL	AK AZ AR CA CO CT DE DC FL GA	HI	ID
IL MT RI	IN	MS OR Wh	MO PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s <u> </u>	\$0
	Equity	\$ <u> </u>	\$0
	Convertible Securities (including warrants)	\$	\$0
	Partnership Interests	\$ <u>287,925,000</u> *	\$287,925,000
	Other (Specify)	\$0	\$0
	Total	\$ <u>287,925,000</u> *	\$287,925,000
2.	Answer also in Appendix, Column 3, if filing under ULOE.  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the		by \$142 million under ances as set forth in deements.
<b>2.</b>	aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0? if answer is "none" or "zero."		A Dalla
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	64	\$287,925,000
	Non-accredited Investors	0	\$
	Total (for filings under Rule 504 only)		\$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	·	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	. $\square$	\$
	Legal Fees.		\$ 606,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	$\boxtimes$	\$6()(c,(****)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	ROCI	EEDS		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	•••		\$ <u>287,3</u>	19,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Quest 4.b above.				
		D	Payments to Officer, Directors, & Affiliates	Payr	nents to Others
	Salaries and fees		\$		<b>\$</b>
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		\$		<b>\$</b>
	Construction or leasing of plant buildings and facilities		<b>\$</b>		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	⊐	\$		\$
	Repayment of indebtedness		\$		\$
	Working capital		\$		<b>\$</b>

\$287,319,000

 $\boxtimes$ 

Column Totals....

Total Payments Listed (column totals added).....

Other (specify): Investments, Management Fee and other Fund Expense \*\*

<sup>\*\*</sup> A portion of such amount may be used to pay salaries of employees of affiliates of the issuer.

									IR	

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) and Rule 502.

Issuer (Print or Type)	Signature V	Date
Markstone Capital Partners, L.P.	2 cear slun	July 23 , 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Scott Gluck	Authorized Signatory ()ice Preside	ent

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE	SIGNATURE	<u> 1. sent Sand Sandition</u>						
1.	Is any party described in 17 CFR 230.262 prese			uch rule?	YES	NO				
		See Appendix, Colu	nn 5, for state response.							
2.	The undersigned issuer hereby undertakes to fu such times as required by state law.	mish to any state administra	itor of any state in which thi	s notice is filed a notice on Form D (17	CFR 239	9.500) at				
3.	The undersigned issuer hereby undertakes to fur	nish to the state administrat	ors, upon writer request, info	ormation furnished by the issuer to offer	ees.					
4.	The undersigned represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limiting Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
The is person	suer has read this notification and knows the co	ntents to be true and has d	aly caused this notice to be	signed on its behalf by the undersigne	d duly au	thorized				
Issuer	(Print or Type)	Signature	0/ /	Date						
Marks	tone Capital Partners, L.P.	2) Cert/	Ileury	July 23 , 2004	· 					
Name	of Signer (Print or Type)	Title of Signer (Print or T	ype)	-						
Scott (	Gluck	Authorized Signatory (	The Preside	at	-					

Scott Gluck

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1		2	3			4		Disqualifi	5 cation under		
	accredited in	Type of security and aggregate offering accredited investors in State (Part B-Item 1)  Type of security and aggregate offering amount purchased in State (Part C-Item 1)  Type of security and aggregate offering amount purchased in State (Part C-Item 2)							State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AL	165	110		nivestors	Amount	Thvestors	Amount	ies	1,40		
AK											
AZ											
AR											
CA		Х	Limited Partnership Interests - \$62,425,000	29	\$62,425,000	0	0		X		
СО		X	Limited Partnership Interests - \$3,000,000	1	\$3,000,000	0	0		X		
CT		х	Limited Partnership Interests - \$650,000	2	\$650,000	0	0		Х		
DE											
DC											
FL		Х	Limited Partnership Interests - \$1,000,000	1	\$1,000,000	0	0		Х		
GA		Χ .	Limited Partnership Interests - \$5,000,000	1	\$5,000,000	0	0		Х		
НІ							i				
ID											
IL											
IN											
IA											
KS											
KY .											
LA									!		
ME											
MD		Х	Limited Partnership Interests - \$500,000	1	\$500,000	0	0		Υ		
MA											
MI				· · · · · · · · · · · · · · · · · · ·							

# APPENDIX

I	Intend to s	estors in State	Type of security and aggregate offering price offered in state		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
	(Part B-		(Part C-Item 1)	Number of Accredited		Number of Non- Accredited			
State MN	Yes	No		Investors	Amount	Investors	Amount	Yes	No
MS									<del> </del>
MO						· · · · · · · · · · · · · · · · · · ·			<del> </del>
						······································			
MT NE		X	Limited Partnership Interests - \$1,000,000	Î	\$1,000,000	0	0		x
NV							<u> </u>		
NH									
NJ									
NM	,	Х	Limited Partnership Interests - \$20,000,000	1	\$20,000,000	0	0		x
NY		X	Limited Partnership Interests - \$178,100,000	18	\$178,100,000	0	0		x
NC			ţ			-			
ND									
ОН			,						
OK									
OR									
PA		Х	Limited Partnership Interests - \$1,000,000	1	\$1,000,000	0	0		X .
RI									
SC									
SD									
TN									
TX		x	Limited Partnership Interests - \$2,500,000	2	\$2,500,000	0	0		X
UT									
VT									<u> </u>

# APPENDIX

1	Intend to accredited inv	sell to non- vestors in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		arnount pur	investor and chased in State C-Item 2)		Disqualific State UL attach exp waiver	5 cation under OE (if yes, planation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
VA									
WA									
WV									
WI							· · · · · ·		
WY									
Foreign		Х	Limited Partnership Interests - \$12,750,000	7	\$12,750,000	0			X